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ABSTRACT

This paper presents the evaluation of the Family Stress Program, which was designed to deliver human services and save valuable police time through intervention in police calls involving individuals and families in crisis. A brief description of the program's structure, purpose, and development, and a listing of program goals (preventing the breakdown of the family unit and increasing its coping skills; reducing the recurrence of family fights; and reducing police time spent on family fights), are presented in the initial sections. The types of social regulation calls (defined as calls to police requiring both crime control interventions and interventions in the emotional and personal needs of the crime's victim) and human service calls responded to by the Family Stress Program Team are described. Police activities and how they are enhanced by the Family Stress Team are discussed. A comparative time analysis of the social regulation and human service activities of both the police and the team during the first year of funding (May 1981-April 1982) are provided, along with 21 statistical tables illustrating the comparisons. The final section presents conclusions on the Family Stress Program's functioning for each goal established prior to the program's implementation. In addition, specific recommendations related to each goal are presented; the recommendations are based on both observation and data gathered during the first year. (WAS)

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Phoenix South Community Mental Health Center Family Stress Program

Final Evaluation Report

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INTRODUCTION

The present report is an evaluation of the Phoenix South Community Mental Health Center's Family Stress Program. The Program is designed to intervene, through cooperation with the Phoenix Police Department (District 5, Sky Harbor Substation), in police calls involving individuals and families in crisis. It is the intent of this Program to effectively deliver human services and save valuable police time in these situations.

The Family Stress Program was developed by the mental health center in conjunction with the Police Department and was initially funded by a challenge grant provided by First Interstate Bank of Arizona with matching funds contributed by DIAMOND's, Salt River Project, Wallace Foundation, Circle K Sun World Foundation, Gannett-KPNX, Mountain Bell and employee groups of Goldwater's Honeywell and Digital corporations. Such a large list of contributors is noteworthy. It underscores the concern these groups have for a mounting social problem; the increasing use of police in situations not necessarily related to law enforcement or criminal activity. We refer to these as "social regulation" or "human service" situations.

Social regulation calls encompass a wide variety of situations. Such situations can range on a continuum from those with a low presence of danger at one end to a high presence of danger at the other. A typical non-dangerous social regulation call may involve locating an elderly person who is lost and providing that person a ride home. A typical dangerous social regulation call is a violent family dispute. In many of these and other situations, a law has not actually been broken. Yet, a large amount of police time is spent attempting to resolve the personal problems of community citizens. This time might have been invested in crime control.

Data from surveys in fact, support this view. Our own data, gathered through the course of this evaluation show that 9% (41,192 of 459,363) of the City of Phoenix police calls in a one year period were non-dangerous social regulation calls. Another 5% of calls were dangerous, yet they too involve socal regulation. Taken together, social regulation calls constitute a yearly investment for the City of Phoenix, of approximately 47,802.4 police hours. At approximately $16.00 per officer hour the cost to the taxpayer is $764,838.

BACKGROUND

Given the above data it is not surprising that the developers of the Family Stress Program established as one of their goals, to reduce the amount of police time spent in activities unrealted to crime control. Specifically, this focus was on family disturbance calls. In addition, both the mental health center and the police department agreed that idividuals in social regulation situations often needed more psychological assistance than the police could provide.

From the five available Police Districts within the City of Phoenix, District 5

was chosen as the initial program site. There were three major reasons for this choice. First, police data suggested that a substantial proportion (23%) of those police calls potentially amenable to human service intervention occur in the District. In addition, data indicated that 23% of all family disturbance calls occured in District 5 which comprises only 11% of the City's population. The third reason was that the majority of District 5 is in the mental health center's service area.

Following the selection of an appropriate location and securing the sanction of police dpeartment administration, a committee, comprised of District 5 officers and the mental health center staff, was formed. The charge of the Committee was to select the hours of operation and specific purposes of the program (e.g., types of interventions), set up appropriate training procedures, and to act as a formal channel of communication.

It was agreed that the goals of the Program would be to:

1. Prevent the breakdown of the family unit and to improve the family's ability to cope with stress.

2. Reduce the reoccurrance of family fights, particularly those which result in repeated calls to the police.

3. Reduce police time spent on family fights, thus freeing them to respond to street crime concerns (Family Stress Fact Sheet, 1981).

Three individual were selected to implement these goals. They became known as the Family Stress Team. The Team is "on call" Friday, Saturday, and Sunday nights. The hours of operation are on Friday and Saturday between 5 p.m. and 1 a.m., and on Sunday between 4 p.m. and 12 a.m. Team members were provided with specialized training in police safety procedures and family crisis intervention. After the officer had determined a situation was safe and stable the Team would be called. As the Program began operating, it became clear that police officers were calling the Family Stress Team for assistance in family fights as well as in many other instances. Therefore, the goals of the Proram have been expanded from the early focus on family fights and now include a host of crisis intervention activities that we will describe in this report.

METHOD

The present evaluation report will proceed along three lines. We will first provide the reader with a description of the types of social regulation or human service police calls responded to by the Family Stress Program. Police activities, as well as how these activities are believed to be enhanced by the

Family Stress Program, will be discussed. Second, we will present the reader with an account of the social regulation or human service activities of the police in District 5 and of the Team during the operating hours of the Program for the first year of funding (May 1, 1981-April 30, 1982). Finally, we will provide analyses of the time spent on social regulation activities by the police and the Team. In this section, we will examine whether or not the presence of the Family Stress Team members affected the time police officers spent performing social regulation activities.

The methods of data collection and analyses are fairly straightforward. We have built a data base from several perspectives and in doing so have gathered qualitative (non-numeric) as well as quantiative (numeric) information. Our qualitative information is derived from interviews with, and observations of, both the police and the Team. Well over 100 hours of observation were performed. During this time, we rode with both of these groups observing firsthand many of the instances we will report. In addition, indepth interviews were conducted with both groups on and off their shifts.

Our quantitative data comes from several sources. The City of Phoenix has provided us with police data from their records for a two year period; the Program year and the year prior to its initiation (May 1, 1980-April 30, 1982). These data include time, date, location and officer's time on all social regulation police calls. Similar records from the Family Stress Team's first year in operation were obtained and merged with this data. Officers using the Team were requested to complete follow-up questionnaires. Their feedback of perceptions an level of satisfaction are reported.

Our final set of information comes from those police officers who used the Team. We established a "quasi-experiment" using comparative data. The outcome measure was officer time. Two groups were established. The "control" group calls were gathered from officers who would have used the Family Stress Team had they been available. The "experimental" group consists of those calls in which the Family Stress Team was available and was used by the police. Police time spent under these two conditions was then compared to the total time spent by all officers in District 5 during the year of the Program and during it's hours of operation. In an effort to establish the control group, the evaluators had direct access to police logs and the officers involved. For a 3 month period (March 1982 through May 1982), calls where the officer would have used the Team had they been available were identified by the officers. These calls were then verified with official police records to determine officer's time.

In certain instances, police times in either the experimental or control group, were thought to be unusually long for the nature of the call. These times were either verified as being proportionally too long for whatever reason and adjusted to indicate the correct time spent or without verification, left to stand at the reported time. Occasionally, a call could not be located in the official police record. The officer's time would then be verified with the Team and with Program records. If this was not possible, the average amount of time for that type of call was used. In several situations the Team saved all of the officer's time; that is, the officer did not spend any time on the call. In these situations zero time was recorded. An analysis was then completed between

groups for all types of social regulation calls. The result of this entire process is a multiple data set which builds from observational qualitative information to qualitative and quantitative data reported to us, then to more substantive quantitative data from police records.

POLICE CALLS: A DESCRIPTION

As suggested at the outset of this report, social regulatory calls often do not involve criminal activity. Instead, they are characterized by situations involving emotional and/or personal needs of the citizens of our community. They require the delivery of what we term "human services." The fact that human service delivery occurs during a social regulation police call does not necessarily mean that a criminal act has not taken place however. Consider for example, a police call involving a rape. In this situation a crime has been committed and the police must engage in appropriate crime control behavior (e.g., obtaining evidence, etc.). In addition, they must attend to the very real emotional and personal needs of the crime's victim. The police calls we have chosen to view as social regulation calls are those identified by both the police and the Team as requiring interventions of this kind. They can be extreme, as in the above example, or be less emotional in nature (e.g., finding someone who is lost).

In addition to having in emotional impact, social regulation calls present different amounts of danger. In order to obtain a measure of the danger level, we had police officers (N=108) rate (on a 5-point scale with 1=no danger to 5=extremely dangerous) over 100 social regulation calls from their log books. Officers selected only those calls where the Family Stress Team would have been called had they been available. Additionally, officers were requested to categorize the call into one of the 4 types: Public Welfare, Mental Health, victim Assistance and Family Fights. This process resulted in a ranking of the categories along the physical danger continuum. The ranking is displayed in

TABLE 1

Type Call Ranked* by Perceived
Physical Danger Present

TYPE CALL

	Public Welfare	Mental Health	Victim Assistance	Family Fights
Average Rating	1.73	1.87	2.18	2.65

*Ranks: 1=No danger present; 5=Extremely dangerous.

the above table, Table 1. Our discussion will begin with those calls rated as having the least physical danger present (Public Welfare calls) and conclude with those having the highest perceived degree of danger present (Family Fights). This section then, will discuss how the police perform their function during social regulation calls, and how crisis intervention, on the part of the Family Stress Program, is viewed as assisting them in this process.

Public Welfare

Public Welfare calls involve checking on the personal welfare of a citizen. Based on interviews with the police and the Team, we chose to view three types of police calls as falling into this category: 1) "Check Welfare" (police code 900); 2) "Incorrigible Juvenile" (police code 415I); and 3) "Missing Juvenile" (police code 601J).

The first type of call, "Check Welfare," typically involves the investigation of a situation involving someone lost, intoxicated, ill or simply needing other forms of personal assistance (e.g., transportation to a community agency). This type of call serves as a "catch-all" for many (65%) social regulation activities. Criminal activity during these calls is reported as extremely low. Two officers, one "in response," and on "back-up," are initially involved in "Check Welfare" calls. Our earlier example of responding to a lost elderly citizen would be a "Check Welfare" call. In this case, the officer "in response" might spend as long as 2-3 hours locating the individual's place of residence. Since there is typically no danger or criminal activity on this type of call, the officer can simply call the Team after assessing the situation and turn the individual(s) over to them. The Team can insure that the citizen's personal needs are met.

The second type of Public Welfare call, "Incorrigible Juvenile," is somewhat different. These calls involve younger individuals who have run away from home,

are truant, have been disobedient with their parents, have violated curfew, etc. In these calls the young person is not arrested unless the offense is serious. Instead, the police must locate the individual's parents (if he/she is away from home) and explain the situation to them. Officers report these types of calls to be indicative of general problems with a family, and as such, can be very time-consuming. In addition to saving police time, police officers report that the major benefit of the Family Stress Program is to the family. Once having identified the problem, Family Stress Team members can provide immediate counseling to the family as well as referring them directly to an agency which meets their specific needs. The key to this problem, according to the officers, is a need for a more intensive intervention than they have the time to provide. In the long run, it is hoped this would lead to a reduction in the problem for the family and a decrease in the number of "Incorrigible Juvenile" calls in the District.

The final type of Public Welfare call is a "Missing Juvenile" call. The age of the juvenile is a critical factor for the police on this type of call. Typically, if the missing person is a child under 10 years of age an intensive search is begun. When the individual is older, it is often presumed that a problem in the home caused the runaway. Although missing person reports are completed in both instances, the latter may not involve as extensive a search nor does it always involve a resolution. The officers simply do not have the time to both find the individual and help resolve the home problem. Officers feel the Family Stress Team can reduce the stress experienced by families whose child is lost, provide long-term follow-up in cases or runaways, and work with the family to resolve existing home problem.

In summary, Public Welfare calls involve little danger or crime control yet, they consume a large amount of police officer's time. To provide the reader

TABLE 2

Distribution of Public Welfare Calls
May 1, 1980 to April 30, 1981

	District 5 Program Hours	District 5 Non-Program Hours	Other Districts All Hours	All Districts All Hours
Number of Calls	2,070	6,414	28,583	37,067
% of the Total Number of Calls	(6%)	(17%)	(77%)	(100%)

with an understanding of the magnitude of that time, the preceding table, table 2, displays the number of Public Welfare calls to the police during the year prior to implementation of the Family Stress Program. The calls are broken down by District and by hours of operation. As can be seen in table 2, over two-thousand Public Welfare calls occurred during the Program's planned operating hours. This number is all the more impressive when one considers that 63% (2,567 of 4,080) of all social regulation calls during these times were Public Welfare calls and consumed 6,726 hours and 41 minutes of District 5's officers' time at an average of 48 minutes a call.

Mental Health

Our interviews with the police and the Team suggested to us that four types of police calls fit the broad category of mental health; 1) "Insane Person" (police code 918); 2) "Overdose" (police code 901o); 3) "Suicide" (police code 901 and 901x); and 4) "Death Messages" (police code 10-79).

An "Insane Person" call can involve retarded citizens who are mislabled by those who phone the police, citizens who are chronically mentally ill, or someone having immediate and severe psychological problems. Our own data, and interviews with the police suggest that approximately 20% of these calls are somewhat dangerous, another 18% are moderately dangerous and the remaining 62% are not at all dangerous. Depending on the degree and type of psychological problem involved, one type of "Insane Person" call might involve two officers (again, one "in response," and one on "back-up") removing an individual from his/her wanderings in a busy intersection or preventing someone from knocking on doors in a neighborhood. Often, these individuals end up in jail simply due to limitations in police time and the lack of available resources. The police feel the Family Stress Program aids them in these situations in several ways. After the officer determines the situation is non-dangerous and the individual is willing to go, the Family Stress Team can obtain immediate shelter and/or treatment (e.g., County Hospital) for the individual. The police feel the Program provides more extensive follow-up in these cases. Further, officers believe that the Program could be of benefit to the police through presentations to the court on the "particulars of the case" during an initial hearing following an arrest. This saves the officer time he/she would spend in court, and has the additional benefit of having a person be appropriately released from, or detained in jail.

Another call we have labeled Mental Health is one involving an "Overdose." These are lengthy calls for the police. Procedures include a written report, follow-up to the hospital, and a period of time where the officer may wait for a representative from a community drug treatment agency. Police officers doubt that a great deal of time is saved in these instances primarily because they have lengthy procedures they must follow. They do, however, believe that assistance to the overdose victim can be provided by the Family Stress Team before they are taken to the hospital. They also appreciate the Team's assistance in contacting various treatment agencies for them.

A third type of Mental Health call involves a "Suicide;" actual or attempted. In an actual suicide, the police do not perform a great many mental health functions for other individuals who are involved. Typically, several officers

respond to the call and a detective is present. Extensive police work must be done (e.g., the gathering of evidence, etc.) and generally these calls take longer than other mental health calls. Police officers believe the benefit of the Program in an actual suicide is to work with the survivors of the suicide victim. They suggest that although this may not actually save police time (because of procedures that must be followed), it greatly enhances their effectiveness because it frees them to do necessary police work.

In an attempted suicide, the function of the police is to obtain medical treatment for the individual involved and write a report. These calls are also lengthy. Here again, however, the police suggest that the Program's function in an attempted suicide can enhance their own through working with the individual and his/her family or friends at the time of the call as well as during follow-up. The main concern here is to prevent a repeat call.

The last type of call we have categorized as Mental Health is a "Death Notification." Procedurally, these calls are given the lowest priority of all calls and are the only calls responded to by one officer. According to the police, death notifications have an extremely low potential for danger. Officers report that the Family Stress Program could perform these calls without an officer present. Such an approach would save all of the officer's time as well as allow for indepth grief counseling to relatives and friends. A homicide is often associated with a death notification.

To briefly summarize the category labeled Mental Health we again direct the reader's attention to a summary table, TABLE 3.

TABLE 3

Distribution of Mental Health Calls
May 1, 1980 to April 30, 1981

	District 5 Program Hours	District 5 Non-Program Hours	Other Districts All Hours	All Districts All Hours
Number of Calls	55	646	2,238	2,939
% of the Total Number of Calls	(2%)	(22%)	(76%)	(100%)

Victim Assistance

There are two basic types of calls chosen to be viewed as falling into the category of Victim Assistance: "Rape" (police code 261); and "Child Neglect" (police code 312). Other types of calls (e.g., assisting a family following a suicide attempt) could have been placed in this category, however, we have chosen the above calls because if verified they involve dealing directly with a single victim of a crime perpetrated by another. These calls are perceived by the police as involving a higher degree of danger than either Mental Health or Public Welfare calls.

When the Police Department receives a rape report, several (at least 2 and sometimes more) uniformed officers respond. A part of the officer's duty is to protect the scene until a detective arrives. An investigation of the situation is performed by the detective and the officers with necessary reports prepared. If sufficient reason exists to believe a rape has occurred, the victim is taken to a physician who completes an examination. In all, these calls take officers slightly over two hours. The police report that the Family Stress Program is of immense benefit in these situations. First, the Family Stress Team calms the victim while simultaneously aiding the police in obtaining information. This effort produces a twofold bonus; time is saved for the police and needed psychological counseling occurs. Officers report that, because the Team members are women, male officers do not have to call a female officer as they often must, to handle the more sensitive questions involved in an investigation of this type. Finally, the Family Stress Team can provide continued moral support, assistance, and counseling to the victim through the examination and return home. Here again, officers believe time is being saved and an indepth intervention is more likely to occur.

A "Child Neglect" call can refer to abuse or neglect. A neglect call usually involves someone leaving a child alone while going out for the evening. Abuse calls involve actual physical abuse of a child. These cases are automatically turned over to Child Protective Services (CPS). In spite of this, they consume between 1 hour and 45 minutes to 2 hours on an average. The officer must contact CPS, transport the child, and fill out a report. Officers report that although the Program is not often used in these cases, they could provide needed psychological functions prior to the intervention by CPS. In addition, police officers believe that a time savings could be realized by having the Family Stress Team contact CPS and provide needed transportation to a shelter or foster care when necessary.

In TABLE 4, the reader will note that a full 30% (355) of all Victim Assistance

TABLE 4

Distribution of Victim Assistance Calls
May 1, 1980 to April 30, 1981

	District 5 Program Hours	District 5 Non-Program Hours	Other Districts All Hours	All Districts All Hours
Number of Calls	71	284	831	1,186
% of the Total Number of Calls	(6%)	(24%)	(70%)	(100%)

calls occurred in District 5 the year prior to the implementation of the Team. Seventy-one (20%) of these calls occurred during program hours. Program hours constitute only 14% of the police work week, yet District 5 police time invested in Victim Assistance calls was 722 hours and 49 minutes with an average call requiring 2 hours and 2 minutes.

Family Fights

Family fights are the final type of call where the Family Stress Program is employed (police code 415F). As shown by our officers' ratings, these calls are perceived as the most dangerous of all social regulation calls (see TABLE 1). What is not shown in our previous data is that when family fights involve an assault, they are rated as having an even higher danger potential (as average rating of 2.86). In addition to the danger present, these calls can also be lengthy. They require one officer "in response" and often several "back-ups." Calls of this nature come from neighbors when the dispute becomes excessive, or from one of the parties involved. The officer's role is to restore order. If there is to be an arrest (typicaly the husband), it is usually made within the first few minutes an officer is on the scene. When an arrest is made, the officer spends at least one hour on the call. If an arrest is not made, the officer spends time finding alternative short-term solutions. Much of this time is spent locating an alternative place for one of the parties to stay. According to the police, the Family Stress Program offers several new options for officers on family fight calls. First, if an arrest occurs and the Program's Stress Team is present, the Team can remain with the woman and, depending on the circumstances, help provide immediate counseling, provide transportation to a safer location (e.g., a community shelter or the home of a relative), and/or set up an Order of Protection, if desired. When an arrest does not occur, the Family Stress Team can assist the couple in conflict resolution concerning their immediate problem (e.g., solving the fight or separating for the evening). The Team also offers suggestions for longer-term resolution. These suggestions include counseling or follow-up visits from the Team. Through this latter mechanism the police hope the reoccurrances of family

fights can be reduced and officers' time saved. Officers report that due to the volatile nature of these calls, they tend to remain with the Team longer than

TABLE 5

Distribution of Family Fight Calls
May 1, 1980 to April 30, 1981

	District 5 Program Hours	District 5 Non-Program Hours	Other Districts All Hours	All Districts All Hours
Number of Calls	1,387	2,999	15,987	20,373
% of the Total Number of Calls	(7%)	(15%)	(78%)	(100%)

any other type call. TABLE 5, above displays the number and proportion of family fights occurring during the year prior to the Team's implementation. As can be seen in the table, a sizeable proportion (31.6%) of family fights for District 5 occur during Program hours. Of all social regulation calls 29% are family fights. However, during Program hours this proportion increases to 39%. Finally, family fights consummed 2,937 hours and 22 minutes of police time at an average of 40 minutes per call during this time period.

Summary

The preceeding section described the types of calls responded to by the Family Stress Team. Officers' perceptions of danger and the benefits provided to them by the Team were discussed. The least dangerous calls were found to be those categorized as Public Welfare with Mental Health and Victim Assistance viewed as somewhat more dangerous. Family Fights, especially those involving assaults, were perceived as the most dangerous of all calls responded to by the Family Stress Program. In all cases officers report the Team providing more indepth assistance to the caller. Officers also report that in most types of calls, the Family Stress Program does or could save them time. On Family Fight calls the officers indicate that in many cases they stay longer due to the volatile nature and potential for danger which exists in these situations. Regardless of this, they report benefits to them and the individuals involved in the dispute through the Program's efforts.

RESPONSES TO SOCIAL REGULATION CALLS: COMPARING DISTRICT 5 AND THE FAMILY STRESS PROGRAM

In this section the number of social regulation calls responded to by the Family Stress Team during the first year of the Program's operation is compared to District 5 during that same year. Comparisons are made between Program hours (Friday, Saturday and Sunday evenings) and non-program hours (everything else) wherever appropriate. The total time spent by the Team on the various calls is also reported. It is important throughout this section to realize the comparisons between police and mental health center data sets are sometimes approximations. This is necessitated by the use of different radio call definitions between the two staffs involved.

In Fiscal Year 1981-82, Phoenix District 5 was responsible for 19.8% (77,513) of all Phoenix police calls. Fifteen percent (13,230) of District 5's calls were social regulation calls. This is only one percentage point higher than the city's proportion (14%). Approximately one fourth of District 5's social regulation calls occurred during the hours of the Program's operation. TABLE 6

TABLE 6

Distribution of Social Regulation Calls
FY 1981-82

	Public Welfare	Mental Health	Victim Assistance	Family Fights	Total
District 5 Non-Program Hours	6,001 (60.7%)	486 (4.9%)	277 (2.8%)	3,122 (31.6%)	9,886 (100%)
District 5 Program Hours	1,872 (55.9)	66 (2.0%)	64 (1.9%)	1,342 (40.1%)	3,344 (99.9%)
District 5 Totals	7,873 (59.5%)	552 (4.1%)	341 (2.6%)	4,464 (33.7%)	13,230 (99.9%)
Other Dist. All Hours	28,223 (60.1)	1,574 (3.3%)	797 (1.7%)	16,405 (34.9%)	46,999 (100%)
All Dist. All Hours	36,096 (59.9%)	2,126 (3.5%)	1,138 (1.9%)	20,859 (34.6%)	60,229 (99.9%)

represents the number of these calls that occurred as they are broken down by our four categories.

As displayed in TABLE 6, Public Welfare and Family Fight calls represent over 90% of social regulation calls. This is true for the City, the District, and during the hours of the Program. Within District 5 however, a much higher percentage (40.1%) of family fights occur during Program hours than during the rest of the week (31.%). Public Welfare calls are proportinally lower (56% vs. 61% during non-Program hours). What is not displayed in the table is the fact that 30% of District 5's Family Fight calls, 24% of Public Welfare calls, and 19% of Victim Assistance calls occur during Program hours.

TABLE 7

Family Stress Program Calls by Type and Location
FY 1981 - 1982

Location	Public Welfare	Mental Health	Victim Assistance	Family Fight	Other	Total	Duplicated Calls Location %
Onsite	48 (23.0%)	37 (17.7%)	8 (3.8%)	111 (53.1%)	5 (2.4%)	209 (72.1%)	45%
Officer Referral	1 (13.6%)	12 (14.8%)	2 (2.5)	53 (65.4%)	3 (3.7%)	81 (27.9%)	17%
Follow-up	18 (10.1%)	40 (22.5%)	7 (3.9%)	113 (63.5%)		178	38%
Duplicated Totals (with follow-up)	77 (16.5%)	89 (19.0%)	17 (3.5%)	277 (59.2%)	8 (1.7%)	468	100%
Unduplicated Totals (without follow-	59 (20.3%)	49 (16.9%)	10 (3.4%)	164 (56.6%)	8 (2.8%)	290 (100%)	

Table 7 describes the Family Stress Program's efforts by category of call. As expected, on-site Family Fight calls comprise over half (53.1%) of the Program's activities. When refferal and follow-up activities are considered, almost two thirds of the calls are on Family Fights. On-site Public Welfare (23%) and Mental Health (17.7%) calls were engaged in less often and Victim Assistance calls the least often (3.8%). It is informative to compare the distribution of duplicated total calls engaged in by the Family Stress Team (Table 7) with the activities of the District 5 police during the Program's hours of operation (Table 6). This comparison shows that in relation to police activities, the Team spends substantially more of its efforts engaged in Family Fight (50% vs. 40%) and Mental Health (19% vs. 2%) calls, and less in Public Welfare calls (16% vs. 61%). These figures likely reflect the initial priorities of the

Family Stress Program.

Table 8 displays the proportion of social regulation calls the Family Stress

TABLE 8

Program Calls Compared To
Available Calls by Type
FY 1981-1982

	Public Welfare	Mental Health	Victim Assistance	Family Fights	Total
District 5 Prog. Hours	1,872	66	64	1,342	3,344
Family Stress Unit	48	37	8	111	204
% of Available Calls Handled	2.6%	56.1%	12.5%	8.3%	6.1%

Without Public Welfare 156/1,472 (10.6%)

Team was used on by the police during the hours of the Program's operation. As can be seen in the Table, the Family Stress Team was used in 8.3% of the calls involving Family Fights and 56.1% of the Mental Health calls. Only 2.6% of the available Public Welfare calls were taken by the Team and 12.5% of available Victim Assistance calls were answered. This latter figure is increased to 15% when the 2 follow-up Victim Assistance calls are included.

Overall, the Family Stress Program responded to 6.1% of the District's socal regulation calls. When the large, "catch all" category of Public Welfare calls is excluded, the proportion of social regulation calls responded to, increases to 10.6%. This comparison is only for onsite calls. Referrals and follow-up activities are not comparable to the District calls here.

TABLE 9

Family Stress Program "On-Call" Time by Type and Location FY 1981-82

Location	Public Welfare	Mental Health	Victim Assistance	Family Fight	Total
Onsite Total	48:34	49:43	10:35	128:51	237:43
Average	1:01	1:21	1:19	1:10	1:10
Referral Total	8:35	8:18	1:50	35:06	53:49
Average	:47	:42	:55	:40	:41
Follow-up Total	7:45	17:30	5:00	51:30	81:45
Average	:26	:26	:43	:27	:28
Grand Total	64:54	75:31	17:25	215:27	373:17
Total Average	:51	:51	:61	:47	:48

Note: Numbers to the left of the colon reflect hours and numbers to the right reflect minutes.

TABLE 9 represents the total and average amount of time the Family Stress Program spent on calls by category of call and type of service. The Program's Family Stress Team spent 246.5 hours providing services on-site, 55 hours for referrals and 81.75 hours on follow-ups. Generally, between 1 hour and 1 hour and 20 minutes was spent on each on-site call. Family Fight calls consumed most (57.7%) of the Team's time. Our comparison of the proportion of calls taken with the amount of time spent suggests to us that the amount of time spent by the Team increases as the service type becomes more immediate. That is, the Team invests more time in on-site activities than on either follow-up or referral calls. For example, onsite calls comprise 45% of the total number of calls made, yet consume 64% of the Team's actual "on call" time. This is reversed for follow-up calls. In this category, 38% of the calls and only 22% of the Team's time are involved. The Team averages 3 calls per night. The average call (including follow-ups) lasts 48 minutes. In additon, the Team averages 1.8 non-follow-up calls per night with the average call lasting 1 hour and 2 minutes.

From the above data, the following highlights are important:

The District 5 and Citywide data for social regulation calls are very similar (15% vs. 14%).

Proportionately more Family Fight calls are received during the hours of the Program's operation than during the rest of the week (40.1% vs. 31.6%).

The Family Stress Program puts approximately 60% of its efforts into Family Fight calls.

Six percent of the social regulation calls occurrring during their shift are responded to by the Program.

During its hours of operation, the Program responded to 56.1% of those calls defined as "Mental Health".

The 10 "Victim Assistance" calls responded to by the Program represents 15% of the Victim Assistance calls occurring during its hours of operation.

The Program averaged 3 calls per night.

The averge call lasted 48 minutes.

RESULTS

This section reports in two ways the impact of the Program's existence. First, officers' perceptions of time saved and satisfaction with the Team are reported. Second, a "quasi experiment" was conducted to compare three groups of police calls. The "experimental" group is comprised of those social regulation calls responded to by the Family Stress Team. The "conrol" group includes police calls where police officers wanted to call in the Family Stress Team, but the Team was unavailable. These groups are compared against each other and to the time spent by all officers in response to calls during the hours of the Program's operation. In addition, officers time spent on calls in District 5 prior to and during the year of the Program's operation and documented for program and non-program hours.

Officers' Ratings

In interviews with the evaluators, officers who sometimes use the Program and officers who use them often reported that the Team was very effective in

delivering crisis intervention servies. Those officers not using the Program reported they were not effective in such crisis situations. In order to provide a rough index of perceived effectiveness, the evaluators assigned a number, based on their perceptions of what a subset of the officers' reported (scale range: 1=not at all effective, 10=extremely effective). The results of this

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TABLE 10

Officer Effectiveness Ratings of
the Family Stress Team

Interview Results	Number in Sample	Team Effectiveness
Officer does not use the Team.	5	2.60
Officer uses the Team sometimes.	2	8.00
Officer uses the Team often.	4	3.75
Questionnaire Results		
Ratings of Satisfaction	32	9.43
(1=extremely unsatisfied; 10=extremely satisfied)		

Ratings are based on a scale of 1=not at all effective; 10=extremely effective.

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rating scale, shown in TABLE 10 above, suggests that in fact, those officers who use the Program view it as effective. Although significant (in a statistically convention sense) caution should be applied in interpreting these data because of the low number in the sample and the possibility that the evaluators ratings (irrespective of high reliability between raters) may not reflect the actual perceptions of officers. We can nevertheless point out that questionnaire data from officers who use the Team tend to substantiate the view that use of the Program brings with it attendant positive ratings. Officers who use the Program report being very satisfied with the Team's performance (again, scale range=1-10). For further data related to officer use and perceptions of satisfaction and effectiveness, the reader is advised to consult our Family Stress Program Evaluation preliminary report (December 8, 1981).

As a part of the questionnaire for officers who used the Program, officers were asked whether the Team intervention saved them time, how much time was saved and whether any repeat calls had been received in each situation. The results are

TABLE 11

Officer Perceptions of Time Saved
(N=32)

Percent reporting time saved.	81%
Average time reported saved per call.	1 hour, 38 minutes
Percent reporting that the call would repeat.	84%
Percent reporting that the call did repeat.	27%

listed in Table 11. As Table 11 reflects, a high prcentage of officers reported a time saving when using the Program. More importantly, the average time savings was substantial (range=10 min. to 4 hours). Additionally, a high percentage of officers (73%) reported no repeat calls on situations with Team intervention, even though a substantial percentage of officers (84%) felt the call would repeat. This data suggest that officers perceive a substantial time savings both at the scene and in potential repeat visits.

Time on Call Comparisons

In the following sections we report the results of police time spent on calls in District 5. The evaluation first compares the amount of police time spent on calls for the year prior to the Program's operation and during its' year of operation. This is followed by a more direct comparison of instances in which the program is used or not used by officers. We address each type of call individually.

Public Welfare:

TABLE 12 below displays the total and averaage time spent by officers in

TABLE 12

Total and Average Officer Time Spent on
Public Welfare Calls in District 5

	Year Prior to the Program		Year During the Program	
Hours of Operation	Total Time	Average Time	Total Time	Average Time
Program	1,518:17	:44	1,265:15	:41
Non-Program	5,208:24	:49	4,348:12	:43
Total	6,726:41	:48	5,613:27	:43

Note: Numbers to the left of the colon reflect hours and numbers to the right reflect minutes.

District 5 on Public Welfare calls. As can be seen in the table, the hours spent on Public Welfare calls went down in District 5 during the year of the Program's operation (down 253 hours, 3 minutes). This reflects trends reported earlier which show the number of Public Welfare calls have gone down city wide. However, in District 5, the average time spent on Public Welfare calls is shorter during the hours the Program is in operation and during the year of the Program than at any other time. Since this trend could be due to yearly fluctuation in time spent on Public Welfare calls and not the Family Stress Program, it is necessary to employ our more rigorous "comparative" analyses here. The results are displayed in TABLE 13 below:

TABLE 13

Experimental Results Comparing Officer Time
On Public Welfare Calls

	District 5 Program Hours	Control Group	Team Used	"Control" -Team
Average Officer Time	:41	1:14	:28	:46
Number of Calls	(1,872)	(28)	(45)	

Note: Numbers to the left of the colon reflect hours and numbers to the right reflect minutes.

It is clear that the Team's use makes a large difference in the time spent by an officer. This time is significantly (in a conevtional statistical sense) lower than the officer time spent when they desire to use the Team, but the Team is unavailable (46 minutes lower). Officer time when the Team is used, is also lower than the population as a whole (13 minutes lower). This differences in time spent could be due to the police officers' recognition of time savings for lengthy Public Welfare calls or to the possibility that the Team is more frequently used on lengthy calls. Our observaations and interviews suggest the latter is more likely the case. That is, officers will typically make an assessment of how long the Public Welfare call wil take. If that time is substantially longer than the Team's estimated travel time, the officer will use the Team. If the call is likely to be short, they will handle it themselves rather than wait 10 minutes or so for the Team to arrive. The typical Public Welfare call to the Team saves the officer time since all they do is wait until the Team arrives, exchange information, and leave.

Finally, and of major importance, is the potential for time-saving on these types of calls in the future. The Program appears to have saved an estimated 34 1/2 hours in police time on Public Welfare calls during their year of operation (difference in Team vs. police time (users) multiplied by the number of calls). Generalizing this to the total available Public Welfare calls during their hours of operation (1,872 calls), and presuming that an average of 13 minutes can be saved in these situations, a total savings of approximately 405 officer hours might be realized in the future. Given that an officer hour costs $16.03, this would result in a savings of almost $6,500. This savings would of course depend on both the availability of the Family Stress Team as well as how amenable all of these calls are to intervention. Nevertheless, even if time could be saved in half of the Public Welfare calls, an important reallocation of police resources could be realized, especially since this estimate does not include any consideration of the back-up officer's time nor the administrative costs involved.

Mental Health: Calls we have categorized as Mental Health represent a lower proportion of social regulation calls than the category of Public Welfare. The average time per call is slightly higher. Mental Health calls average just over 3/4 of an hour, whereas Public Welfare calls average just under 3/4 of an hour.

TABLE 14

Total and Average Officer Time Spent
on Mental Health Calls in District 5

Hours of Operation	Year Prior to the Program		Year During the Program	
	Total Time	Average Time	Total Time	Average Time
Program	44:00	:48	56:33	:51
Non-Program	535:11	:43	441:3	:46
Total	579:11	:44	497:35	:47

Note: Numbers to the left of the colon reflect hours and numbers to the right reflect minutes.

TABLE 14 above displays total and average time for District 5 Mental Health calls during the on and off hours of the Program. Total time spent on this type of call went down for the District (579 to 497) and non-Program (535 to 441) hours. However, the program hours category went up in total time (44 to 56). The number of calls also went up during the Program hours (55 to 66). Average time spent on Mental Health calls went up for both groups between the two years. In all cases, the increase was 3 minutes per call. These data suggest first that officers in general appear to be investing more time on the average Mental Health call. Secondly, it appears that more time (in shear numbers) is invested when the program is operating.

TABLE 15

Experimental Results Comparing Officer Time on Mental Health Calls

	District 5 Program Hours	Control Group	Team Used	"Control" -Team
Average Officer Time	:51	1:46	1:13	:33
Number of calls	(65)	(12)	(28)	

Note: Numbers to the left of the colon reflect hours numbers to the right reflect minutes.

Turning now to our "comparative" data found in TABLE 15 above it can be seen that the average police time spent on a Mental Health call in the district during program hours is 51 minutes. This is lower than the 1 hour and 46 minutes average time recorded for the "control" group and the average time of 1 hour and 13 minutes officers spent when the team was used. Our statistical tests revealed that the difference the "control" group and the actual Team use is only marginally significant (is slightly beyond conventional levels). Based on these figures we can with somewhat less confidence than in the case of Public Welfare calls suggest that the Program may save the police time on Mental Health calls.

As was the case in Public Welfare calls, it appears officers use the Program on longer Mental Health calls. To substantiate this view, we added the number of hours from the "control" group calls to the number of hours on calls utilizing the Team and subtracted this from the total number of hours spent on mental Health calls for the District during proram hours (66 calls x 51 minutes or 3,366 minutes). This calculation showed that the few calls that remained (26 calls) took only a few minutes each to complete. Although far from perfect, these data suggest the Program is used, or its use is desired in the majority of Mental Health calls (61%). Further, those calls where the Team is not desired are the shortest calls for the officer. Thus, similar to Public Welfare calls, officers may initially assess the potential length of a Mental Health call and only use the team when a time savings wil be realized.

Finally, a word about repeat Mental Health calls is in order. Our observations and interviews suggest to us that an appropriate onsite call to the Team in Mental Health situations produces an "indepth" intervention by individuals specifically trained in this area. As a result Mental Health calls may not repeat in the future. For example, working with a potential suicide victim may lessen the chance of a repeat occurance. Although we have no hard evidence with which to back up this speculation, the vast majority of our inteview sample (81%) sugested this is the case for all repeating types of calls.

Victim Assistance: By far, the Victim Assistance calls consume the most police

TABLE 16

Total and Average Officer Time Spent on
Victim Assistance Calls in District 5

Hours of Operation	Year Prior to the Program		Year During the Program	
	Total Time	Average Time	Total Time	Average Time
Program	130:52	1:51	137:24	2:09
Non-Program	591:57	2:05	609:17	2:12
Total	722:49	2:02	746:41	2:11

Note: Numbers to the left of the colon reflect hours and numbers to the right reflect minutes.

time per call. TABLE 16 above shows the average time spent on the 341 victim Assistance calls in the District is over twice that of other calls. The average time spent on a Victim Assistance call is slightly over 2 hours.

Two other points can be made from these data. First, although the number of Victim Assistance calls went down for the District during the year the Program was in operation (355 to 341), the average time spent on those calls went up. Second, Victim Assistance calls took shorter average times during the weekend evening hours during both the year prior to the Program and the year of its operation. As such, any speculation from these data concerning an overall time savings for the district as a whole would be problematic. We can however turn to our sample and make inferences from these data.

TABLE 17

Experimental Results Comparing Officer Time on Victim Assistance Calls

	District 5 Program Hours	Control Group	Team Used	"Control" -Team
Average Officer Time	2:09	1:59	:55	1:04
Number of Calls	(64)	(10)	(6)	

Note: Numbers to the left of the colon reflect hours and numbers to the right reflect minutes.

Turning now to the "comparative" data in TABLE 17, we find a striking difference between police officers' time in the presence and absence of the Team. When the Team is used by uniformed officers in Victim Assistance calls, over one hour of their time is saved when compared to the "Control" group or the whole District (the former case is statistically significant beyond conventional levels and for the latter case concerning the population, no statistical comparison is necessary).

Our interviews suggest this Program function is viewed as extremely valuable by the police. Officers appear to know that the arrival of the Team in a rape situation means that they are spared an extremely difficult burden and their time is saved. These officers further suggest that the victim prefers not only talking to a woman (Team members are women) during these situations, but also prefers that person not to be in uniform. They point out that the uniform is sometimes a barrier to human service intervention. Thus, the Team can simultaneously gather important information and help the victim in these cases (see preliminary report, Family Stress Program Evaluation, December 8, 1981).

As a final comment, we note that the program was used on only six Victim Assistance cases, yet, many other Victim Assistance calls occurred while the Team was available. When combined with the time savings data we would speculate that a stronger effort directed toward increased use of the Family Stress Program in Victim Assistance calls would result in substantial officer time savings in the future.

Family Fights: We now turn to our last category of police calls; Family Fights. These social regulation calls occur quite frequently in the District (ranked second only to Public Welfare calls) and occur proportionally more often during the hours of operation of the Program (see previous section). The Program itself invested the greatest amount of time in these calls. Of all the social regulation calls, Family Fights are viewed by officers as having the highest

degree of physical danger present.

TABLE 18

Total and Average Officer Time Spent on
Family Fights in District 5

Hours of Operation	Year Prior to the Program		Year During the Program	
	Total Time	Average Time	Total Time	Average Time
Program	988:37	:43	946:35	:42
Non-Program	1,948:46	:39	1,982:59	:38
Total	2,937:23	:40	2,927:34	:40

Note: Numbers to the left of the colon reflect hours and numbers to the right reflect minutes.

TABLE 18 above depicts the officer time spent on Family Fights in the the year prior to and during the Program.

During the Program year, there was a drop in the total time invested in Family fights while the Team was on duty. When the Team was not on duty, the total time spent went up. This pattern is repeated for the actual number of family fights for these time periods. As TABLE 19 shows, the first year of the

TABLE 19

Two Year Comparison of
Family Fight Calls in District 5

Hours of Operation	Year Prior to the Program	Year During the Program
Program	1,387	1,342
Non-Program	2,999	3,112
Total District 5	4,386	4,454

program's operation, witnessed a reduction in family fights during Program hours as compared to an increase in family fights during non-Program hours. One possible explanation for this difference is that repeat calls during weekend evening hours are down as a result of the Program's implementation. Alternatively of course, rival explanations exist. One explanation is that those families who were calling the police on the weekend have shifted their pattern of domestic disputes to weekdays, for whatever reason. Another is that the observed pattern is suprious. An important next step would be to perform an assessment on the 1983 data tracking over time the families involved in the domestic disputes. If a similar pattern were found these rival explanations would be considerably weakened.

TABLE 20

Experimental Results Comparing Officer Time Spent on
Family Fight Calls

	District 5 Program Hours	Control Group	Team Used
Average Officer Time	:40	1:00	1:08
Number of Calls	(1,324)	(55)	(100)

Note: Numbers to the left of the colon reflect hours and numbers to the right reflect minutes.

The final set of analyses involves our comparative data. Table 20 above displays average police time and shows that both the times in which the Team was used on Family Fight calls and the "Control" group calls tend to be higher than the total District averages. There are two possible explanations for these data. First, the Team is used on longer Family Fight calls. This explanation is similar to that used in previous catagories of calls. Officers complete an assessment very early in a call and if it is a relatively simple matter, they handle the situation. When the situation calls for a more indepth intervention, the Team is used. The second explanation involves the element of danger present in family fights. Our observations, discussions, and the data on danger itself suggest that officers wait longer with the Team in the case of family fights than in other situations. We would argue that they may wish to insure a stable situation prior to leaving. Other comparative data support this view. Consider

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TABLE 21

Experimental Results Comparing Officer Time in Family Fights With Assaults to Family Fights Without Assaults

	"Control" Group	Team Used
Family Fight With Assault	1:06	1:17
Number of Calls	(23)	(40)
Family Fight Without Assault	:53	:62
Number of Calls	(32)	(60)

Note: Numbers to the left of the colon reflect hours and numbers to the right reflect minutes.

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the data in the above table, TABLE 21, which compares family fights with assaults to those without assaults. Note that the more dangerous situations involving family fights with assaults use more officer time with and without the Team. Further, the longest officer time occurs when the Team is at a call with an assault (77 minutes). These data suggest that officers spend more time on Family fight calls with assaults when the Team is involved. In additon, the fact that times are highest in more dangerous Family Fight calls involving assaults weakens the argument that it is simply the case that the team is used on longer calls and strenghtens the case that the police stay longer in more dangerous situations.

A final word about time savings is in order. It is important to note that

although Family Fights, probably because they involve physical danger, do not result in a time savings in each particular case, a long-term time savings may be realized if fewer of those calls repeat in the future. Based on the data showing a reduction in calls during program hours compared against a trend upward during nonprogram hours, it is our speculation that due to the more indepth intervention and follow-up engaged in by the Team such long-range savings to the police are likely realized. Further studies are necessary to support this speculation however.

CONCLUSIONS

In this section we will present conclusions on the Family Stress Program's functioning for each goal established prior to the Program's implementation. In addition, recommendations are presented. Finally, it is important to assess on an overall basis the merits of continuing the Program and, specifically, the Team. It should be noted that at times we base these conclusions and recommendations on our observations alone, and at other times both our observations and the data we have presented in this report.

Goal 1 - To prevent the breakdown of the family unit and to improve the family's ability to cope with stress.

Relevant Data:

Interviews with officers who used the Family Stress Program indicated those who often of sometimes called in the Team viewed them as being very effective (8 on a scale of 10 = extremely effective).

Officers who did not use this Program viewed them as being less than effective (2.4 on a scale where 1 = not at all effective).

Observations by our team of evaluators who accompanied both the police and Team on a number of calls assessed the Team to be extremely effective in their responses to the various types of calls.

Conclusions:

For the officer on patrol the Team provides an additional resource. Prior to the Team's availability the officer had four options: 1) Make an arrest; 2) Provide some "counseling"; 3) Call a relevant human service agency; or 4) In the case of family disturbances, separate the parties as quickly as possible. Most of these options had drawbacks. Officers do not have the time, nor always the skills, to provide counseling. The assistance of a relevant human service agency is only available in select cases and usually involves an extensive wait. Separating family members is a temporary solution and often results in repeat calls to the police. The Team can invest a larger amount of time and provide a more in-depth intervention in the situation, assisting the individual with their emotional and/or familial problems

Recommendations: 1. This goal should be expanded and made more precise to include not only the family's ability to cope

with stress, but also the individual's. Specifically, the Program has expanded its activities beyond the family. The Team now responds to all types of Mental Health calls. In addition, they respond to Victim Assistance calls (rape, etc.) and Public Welfare calls which generally have mental health overtones. Many of these situations do not involve families, they involve individuals with emotional problems. Based on their utilization rates, the police want this. In addition, it is likely that the recepient of aide benefits and perhaps stress is reduced. However, stress was not measured in this study, nor is it easy to assess. In the future, it would be helpful to more precisely define the benefits to gained by the citizen through the intervention of the Program. Moreover, both the terms "stress" and "the breakdown of the family unit" are difficult to define. As such, we believe a spcification of the objectives that should follow from this goal should be written, or the goal itself should be redefined.

2. The Team, as it expands the calls it responds to, should increase and improve internal communications with the various squads that are "on the streets" during their shifts. A regular schedule of briefing attendance to provide both parties with information on the types of calls each is responding to, and any other relevant feedback would be beneficial to both the Team and the officers. New officers brought into the District can be educated on the Team's functions in this manner. The likelihood of the "old timers" using the Team by learning more about the Program's activities might also be increased through such meetings.

Goal 2 - To reduce the reoccurence of family fights, particularly those which result in repeated calls to the police.

Relevant Data:

Family Fight calls did show a reduction during Program hours.

During non-Program hours the number of Family Fight calls went up.

Conclusion:

In general, the types of calls responded to by the Program increased this year as compared to last. This was not true in the category of Family Fights and was specific to the hours of the Program's operation. While other explanations exist, one is that the Family Stress Team helped to reduce these calls.

Recommendations: 3. In a future evaluation, analyze the repeat calls that occur in situations involving the Team vs. those that do not. A major problem here would be to coordinate the to data systems being used. Specifically, a police coding system would be necessary to identify those calls responded to by the Family Stress Team.

Goal 3 - To reduce police time spent on family fights, thus freeing them to respond to street crime.

Relevant Data:

Comparing our control group with the Family Stress Program calls, a savings of 46 minutes was found on Public Welfare calls. Public Welfare calls represented 56% of the possible calls the Program could respond to.

Mental Health calls showed a savings to the officer of 33 minutes when the Family Stress Program was compared to the control group. 56% of all possible Mental Health calls were responded to by the Program.

The largest time savings, 1 hour and 4 minutes, was on the smallest category of calls: Victim Assistance. On only one-eighth of the Victim Assistance calls was the Team called to the site of the incident.

No time savings were found Family Fight calls, yet 60% of the Program's efforts involved Family Fights. Officers report staying longer on Family Fight calls to insure the stability of this extremely volatile call.

Conclusions:

Sixty percent of the Family Stress Proram's calls were Family Fights. No police time is saved on these types of calls initially. Forty percent of the Program's effots involve a variety of other types of calls. All of these likely save the officer time.

Victim Assistance calls save the officer the most time. However, the Program was only included in one-eighth of the calls possible while they were on duty. The use of the Program in Victim Assistance calls needs to be increased dramatically. This would save the police a large amount of time and the Program would be able to provide counseling and support to the victims while assisting the officers in obtaining critical information.

Public Welfare calls represent the greatest potential for saving police time. They represent the largest proportion of calls to which the program could respond. This, plus the savings of 46 minutes per call, could generate an enormous time saving to the individual officer and the District as a whole.

Mental Health calls show relatively high utilization of the Program by officers. The officers appear to understand the connection between these calls and the mental health nature of the Program.

Recommendations:

4. Increase officer education and awareness of the benefits of using the Program on Victim Assistance calls.

5. The Family Stress Proram should, if this goal is important, expand their activities to include more Public Welfare calls. These calls consist largely of social service type situations. While the Program does respond to some of these calls, the total is a relatively small number. This is curently appropriate. The Program is not designed to provide social services, rather, it is designed to provide mental health/behavioral health services. However, if this goal is appropriate to the Program an alternative means of providing assistance on these types of calls should be considered. Perhaps less highly trained volunteers could be available as an alternative to the Team. The potential savings is worth expanding the concept of human services and police interacton into new areas.

OVERALL CONCLUSION

It is the conclusion of this Report that the Family Stress Program has been successful. The officers are satisfied and enthusiastic about having the Team as a resource. The Program saves officers' time and it appears that the number of repeat Family fight calls is reduced. The pilot project should be continued and, if possible, expanded. It has provided improved services and interventions for families and individuals in emotional situations. The Program has saved the time of police officers in roughly 40% of the calls to which they responded. There is some indication that the Program has an impact on reducing repeat calls to the police. All of this data supports the original concept of the Program, that it would be of benefit to the individual, the Police Department and the community.